

July 9, 2019

The Honorable Robert Wilkie Secretary of Veterans Affairs U.S. Department of Veterans Affairs 810 Vermont Avenue, NW Washington, DC 20420

Dear Secretary Wilkie:

We write today with concerns about the Department of Veterans Affairs' (VA) implementation of the VA MISSION Act, particularly the launch of a new consolidated community care program earlier this month. As the VA rolls out the new Veterans Community Care Program, we urge you to avoid the mistakes that plagued the Veterans Choice Program and to ensure that community care supplements the irreplaceable care offered at VA hospitals and clinics.

You are no doubt aware of the Veterans Choice Program's numerous shortcomings. A GAO report released two months ago cited three major flaws in the program: complex referral and appointment scheduling processes; incomplete and unreliable data on the timeliness of veterans' access to care; and a lack of timely payments to community providers. Veterans contacting our offices reaffirmed the GAO's conclusions. Roughly one-third of the complaints we received on VA health care related to the Choice Program: long waits for appointments; providers outside the VA lacking patient files and information about the veterans they were seeing; and long delays in processing billing requests from providers.

While we have seen some improvements, the poor performance of the Choice Program spurred Congress to pass the VA MISSION Act. As the VA moves to implement that law, we are concerned that officials may not learn from past mistakes. For example, we fear that that VA and third-party administrators may continue to withhold information about billing practices and procedures from community health providers, as often happened under Choice. We are also concerned that TriWest remains a third-party administrator for the Veterans Community Care Program, despite a large number of complaints about its performance under Choice. And we have heard from some staff that the VA has been slow to share guidance and information about the Community Care Program launch, which echoes what we heard about the Choice Program roll out.

To help us understand the VA's decisions throughout this process, please answer the following questions by July 31.

- What problems did the VA identify from its experience with the Choice Program, and what is the VA doing to ensure those same problems do not arise again under the VA MISSION Act?
- When did the VA first provide information and guidance on the new law to VA Health Care Systems in Oregon and Idaho?
- What steps has the VA taken to ensure community providers understand billing practices and procedures under the VA MISSION Act?

- What steps has the VA taken to ensure community providers will receive timely payments under the new law?
- When will the VA establish contracts with community providers under the Community Care Network and provide lists of in-network providers to veterans?

We believe strongly that veterans should spend their time getting good health care rather than driving to it, especially in states like Oregon where many veterans living in rural areas are underserved. VA facilities in our state and across the nation have decades of experience serving veterans and offer unmatched specialty care and services; even so special interests continue their relentless push to outsource or privatize aspects of veterans care. We implore you to implement the VA MISSION Act based on the principle that community care must never come at the expensive of VA's core functions.

We look forward to your responses to our questions and stand ready to work with you to make sure the VA fulfills the vision we all should share: providing excellent health care to veterans efficiently, effectively and on a timely basis.

If we can be helpful in any way, please don't hesitate to reach out to us or our offices.

Sincerely,

Jeffrey A. Merkley United States Senator

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